

SECRETARY OF THE SENATERQ-1

15 AUG 13 PM 4:00

July 16, 2015

IAN SCHLAKMAN, TREASURER FLOWERS FOR SENATE 2813 MAISEL STREET BALTIMORE, MD 21230

IDENTIFICATION NUMBER: C00581272

Sec attached Response Due Date 08/20/2015

REFERENCE: STATEMENT OF ORGANIZATION

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the Statement of Organization referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. An adequate response must be received by the response date noted above. Additional information is needed for the following 1 item(s):

The Statement of Organization (FEC Form 1) that your committee submitted was not signed. The candidate or the committee's treasurer must sign the Statement of Organization. Please re-submit your filing to include the proper signature. (11 CFR § 102.2(a))

Please note you will not receive an additional notice from the Commission on this matter. Adequate responses received on or before this date will be taken into consideration in determining whether audit action will be initiated. Requests for extensions of time in which to respond will not be considered. Failure to provide an adequate response by this date may result in an audit of the committee. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action.

A copy of FEC FORM I can be downloaded from the FEC website at http://www.fec.gov, or requested through the FEC Faxline at (202) 501-3413. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1174.

FEC FORM 1

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STATEMENT OF **ORGANIZATION**

SECRETARY OF HE FHATE

15 AUG 13 PM 4: 00

			Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
Flowers for Sena	ite		
	,2813 Maisel Street	<u> </u>	
ADDRESS (number, and street)	2010 Walser Outset		
(Check if address is changed)			
io dianges,	Baltimore		MD 21230
	CITY ▲		STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	ESS		
(Check if address	flowers4senate@gmai	l.com	
is changed)	Optional Second E-Mail Ad	ddress	
	Optional Second 2 Main 1 to		<u>, , , , , , , , , , , , , , , , , , , </u>
(Check if address is changed) 2. DATE M M D O7	06 Y Y Y Y Y 2015		
3. FEC IDENTIFICATION !	NUMBER ► C		
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)	
I certify that I have examined	this Statement and to the bes	st of my knowledge and belief	it is true, correct and complete.
Type or Print Name of Treasu	ırer lan Schlakman		
Signature of Treasurer	ı Schlakman. Ha 9	M	Date 07 06 2015
NOTE: Submission of false, erro	oneous, or incomplete informatio	n may subject the person signing	g this Statement to the penalties of 2 U.S.C. §437g WITHIN 10 DAYS.
Office Use Only		For further information Federal Election Commi Toll Free 800-424-9530 Local 202-694-1100	

FEC Form	n 1 (Revised 02/2009)						1 age 2	
TYPE OF CO	MMITTEE Committee:		,					
	This committee is a principal	campaign com	nmittee. (Cor	nplete t	he candidate in	formation below	.)	
(b)	This committee is an authorizinformation below.)							late
Name of Candidate	Margaret Flower	S 					1 1 1 1 1 1	<u> </u>
Candidate	CMICE		State	MD				
Party Affiliatio	n GRE So	ought:	House	×	Senate	President	District	00
(c)	This committee supports/opp	oses only one	candidate, a	and is N	IOT an authoriz	zed committee.		
Name of Candidate								11_
Party Com	mittee:	/N	ational, Stat	Δ			(Democratic,	
(d)	This committee is a		subordinate		ittee of the		Republican, etc.) Party.	
Political A	ction Committee (PAC):	<i></i>						
(e)	This committee is a separate		und. (Identify	connec	cted organization	n on line 6.) Its co	onnected organiza	ation is a
	Corporation		Cor	poration	w/o Capital St	ock	Labor Organi	zation
	Membership Organi:	zation	Trac	le Asso	ciation		Cooperative	
	In addition, th	nis committee is	s a Lobbyist/I	Registra	int PAC.			
(f)	This committee supports/op- committee. (i.e., nonconnecte	poses more the ed committee)	an one Fede	eral can	didate, and is N	NOT a separate	segregated fund	or party
	In addition, this comm	nittee is a Lobb	yist/Registra	nt PAC.				
	In addition, this comm	mittee is a Lead	ership PAC.	(!dentify	y sponsor on line	e 6.)		
Joint Fund	 Iraising Representative:	:						
(g)	This committee collects contr committees/organizations, at	ributions navs t	fundraising e hich is an au	xpense: thorized	s and disburses I committee of a	net proceeds for federal candidat	two or more polit e.	ical
(h)	This committee collects contr committees/organizations, no	ibutions, pays fone of which is	fundraising e an authorize	xpense: d comm	s and disburses littee of a federa	net proceeds for I candidate.	two or more polit	ical
Com	mittees Participating in Jo	int Fundraise	r					
1.					FEC ID r	number C		
2.					FEC ID r	number C		
3.			<u> </u>		FEC ID r	number C		
4.					FEC ID r	number C		
4.			<u> </u>					

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Wı	rite or Type Committee Name	
F	lowers for Sen	ate
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
N	ONE	
Ш		
	Mailing Address	
		CITY STATE ZIP CODE
	Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor
7,	Custodian of Records: Identification books and records.	tify by name, address (phone number optional) and position of the person in possession of committee
	Full Name Brian Bittn Mailing Address	P.O. Box 29915
		Baltimore MD 21230
	Title or Position	CITY STATE ZIP CODE
		Telephone number
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name and address of assistant treasurer).
	Full Name Ian Schlak of Treasurer	nan
	Mailing Address	P.O. Box 29915
		Baltimore MD 21230 - LITY STATE ZIP CODE
	Title or Position	
ı		Telephone number L 1 - L L L L L L L L L

Ocsignated	Bittner		
Agent L	_I P.O. Box 29915	1 1 1 1 1	
Mailing Address	1.0.500 25010		
	Baltimore	L ^{MD}	21230
	CITY	STATE	ZIP CODE
Title or Position			. [_] [_] .
	<u>i </u>	number [
Banks or Other Depos safety deposit boxes or	itories: List all banks or other depositories in which the com-	nittee deposits f	unds, holds accounts, ren
Name of Bank, Deposito			
.M. o.	nd T Ponk		
lvi ai	nd T Bank	11111	<u></u>
Mailing Address	1111 Light Street		
		<u> </u>	
	Baltimore	I MD I	21230
	terretaria de la contrata del contrata de la contrata del contrata de la contrata del la contrata de la contrata del la contrata de la contra	<u> </u>	
	CITY	STATE	ZIP CODE
Name of Bank, Deposito	ory, etc.		
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Marilian Addana	1		· · · · · · · · · · · · · · · · · · ·
Mailing Address			
	CITY	STATE	ZIP CODE
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Secretary of the Servet A Company of the of Public Resolds A Company of the Servet A Company of the of Public Resolds A Company of the office of the Washington, DC 20013-7578

U. S. SENATE
TRACKING NUMBER

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DANA K. MACCALLUM SUPERINTENDENT HART SENATE OFFICE BUILDING SUITE 232 WASHINGTON, DC 20510-7116 PHONE (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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SEN PATCH



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